WAC 388-106-0095 How does the CARE tool measure clinical complexity? The CARE tool places you in the clinically complex classification group only when you have one or more of the following criteria and corresponding ADL scores:

Condition	AND an ADL Score of
ALS (Lou Gehrig's Disease)	>14
Aphasia (expressive and/or receptive)	>=2
Cerebral Palsy	>14
Diabetes Mellitus (insulin dependent)	>14
Diabetes Mellitus (noninsulin dependent)	>14
Emphysema & Shortness of Breath (at rest or exertion) or dizziness/vertigo	>10
COPD & Shortness of Breath (at rest or exertion) or dizziness/vertigo	>10
Explicit terminal prognosis	>14
Hemiplegia	>14
Multiple Sclerosis	>14
Parkinson Disease	>14
Pathological bone fracture	>14
Quadriplegia	>14
Rheumatoid Arthritis	>14
You have one or more of the following skin problems: Pressure ulcers, with areas of persistent skin redness; Pressure ulcers with partial loss of skin layers; Pressure ulcers, with a full thickness lost; Skin desensitized to pain/pressure; Open lesions; and/or Stasis ulcers. AND You require one of the following types of assistance: Ulcer care; Pressure relieving device; Turning/reposition program; Application of dressing; or Wound/skin care.	>=2
fou nave a burn(s) and you need one of the following: Application of dressing; or Wound/skin care	>=2
You have one or more of the following problems: You are frequently incontinent (bladder); You are incontinent all or most of the time (bladder); You are frequently incontinent (bowel); or You are incontinent all or most of the time (bowel). AND One of the following applies: The status of your individual management of bowel bladder supplies is "Uses, has leakage, needs assistance"; The status of your individual management of bowel bladder supplies is "Does not use, has leakage"; or You use any scheduled toileting plan.	>10
You have a current swallowing problem, and you are not independent in eating.	>10
You have Edema.	>14
You have Pain daily.	>14
You need and receive a Bowel program.	>10
You need Dialysis.	>10

Condition	AND an ADL Score of
You require IV nutritional support or tube feedings; and	
Your total calories received per IV or tube was at least 25%; and	>=2
Your fluid intake is greater than 2 cups.	
You need Hospice care.	>14
You need Injections.	>14
You need Intravenous medications.	>10
You need management of IV lines.	>10
You need Ostomy care.	>=2
You need Oxygen therapy.	>10
You need Radiation.	>10
You need and receive Passive range of motion.	>10
You need and receive Walking training.	>10
You need Suction treatment.	>=2
You need Tracheostomy care.	>10
You need a Ventilator/respirator	>10
You are <18 and you have pain related to your disability and you complain of pain or show evidence of pain daily. (If you are under eighteen and do not have pain related to your disability, you may be placed in the clinically complex classification based on other factors above.)	>14
Key: < means less than. > means greater than. >= means greater than or equal to.	

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[Statutory Authority: RCW 74.08.090, 74.09.520. WSR 07-10-024, § 388-106-0095, filed 4/23/07, effective 6/1/07; WSR 05-11-082, § 388-106-0095, filed 5/17/05, effective 6/17/05.]
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